## Revised October 2000

## COUNTY OF FAIRFAX

## TOWNHOUSE AND DETACHED SINGLE FAMILY DWELLING COVER SHEET\*

MUST BE COMPLETED BY DESIGNER (please print)	12. Material specifications (e.g., wood species, grade, masonry, steel, etc.) and locations:	18. Pre-manufactured floor and/or roof trusses: (this does <u>not</u> include TJI, GPI, LPI, etc.)	(i) OF ESS
. Code: Year   CABO(R4)  BOCA(R3)	massing stoom etc., and looditorio.	Yes No	
. Type of construction:		if yes, three sets of shop drawings, signed and sealed by	
. Number of stories above grade:		the designer, must be submitted prior to erection. A completed <i>Truss Plan Cover Sheet</i> must be attached to	TALE VIRGINIA
. Sprinklers:  Yes  No	13. Building related development conditions (i.e., proffers,	each set.	COUNTY OF FAIRFAX, VIRGINIA
. Fireresistance design (townhouses only, where required)	special exceptions, special permits, variances) Note	19. Masterfile plan: Yes No if yes, complete the information below.	BUILDING PLAN REVIEW DIVISION OFFICE OF BUILDING CODE SERVICES
Location Design Number	referenced page in which related details/notes can be found in the construction documents:	Model name:	PLAN APPROVAL IS FOR PERMIT ISSUANCE AND IS
Firewall	Sound transmission class rating:	Lot numbers for this model:	SUBJECT TO CORRECTION NOTES ON PLANS AND CONDITION LISTED ON THIS COVER SHEET.
Exterior wall/column	☐ Yes, Referenced page ☐ No	20. Subdivision plan number:	ISSUANCE OF PERMIT IS LICENSE TO PROCEED WITH WORK IN ACCORDANCE WITH ADOPTED CODES.
Interior wall/column	Affordable dwelling units (ADU):	21. Job location (note address and/or subdivision):	ISSUANCE OF PERMIT DOES NOT PRECLUDE FIELD
Floors	☐ Yes, Referenced page ☐ No	21. Job location (note address and/or subdivision).	INSPECTORS FROM ORDERING CORRECTIONS TO MEET CODES WHEN DEFICIENCIES ARE NOTED
Roof/ceiling other:	if yes, do ADUs comply with Housing & Community		DURING INSPECTIONS.
	Development Specifications: Yes No		NO INSPECTION SHALL BE MADE UNLESS AN
. Problem soils: Yes No	Other: Referenced page	22. Name, address, occupation of designer. If designed	APPROVED SET OF PLANS IS ON THE JOB SITE. NO CHANGES SHALL BE MADE TO THE APPROVED PLANS
. Soils Report: Yes No	Other: Referenced page	by a licensed professional registered in the	WITHOUT PRIOR APPROVAL OF THS BUILDING PLAN
if yes, submit one copy.	Other: Referenced page	Commonwealth of Virginia, provide designer's seal in the space provided below.	REVIEW DIVISION.
b. Design soil bearing pressure:psf	The Exterior modulation and times of otomo (211 o).		CALL MISS UTILITY AT 1-800-257-7777 BEFORE YOU
Design soil lateral pressure:pcf	☐ Yes ☐ No		DIG.
Foundation wall design:	if yes, research report number:		These drawings were not reviewed for compliance
Thickness of wall:inches	15. Utility company easements on this site:		relative to electrical, mechanical, or plumbing elements. Compliance will be evaluated during inspection by field
Maximum height of wall:feet	☐ Yes ☐ No		staff.
Maximum height of backfill:feet	16. Wall bracing:		(for county use only)
Type: Concrete Masonry	☐ 1x4 let-in bracing at corners		See Fairfax County Typical Deck Details for the
Design: Plain Reinforced (engineered detail required for reinforced walls)	4 ft. of structural sheathing at corners		following requirements:  Ledger attachment Footing size
Design Loads, psf	☐ Sheathing of entire structure (provide research report for non-structural sheathing)	23. As the designer of this structure, I have reviewed	Post/beam connections Stairs
		the building related development conditions (if any)	Post/footing connections Guardrail/handrail
Area Dead load Live load	Other method:(provide description)	of the associated subdivision or grading plan, and the attached construction documents are in	Approval:
Dwelling Unit	17. Steel columns:	compliance with these conditions. I hereby certify	
Sleeping rooms	☐ AISC standard pipe, ASTM A501, A53	that the information on this sheet is correct.	
Roof	☐ BOCA approved (provide research report)		Reviewer's initials: Date:
Wind other:	☐ Not applicable		Control number:
		Signature Date	* One coversheet is required for each townhouse model and for each subdivision for